



7-1-04

JW

AUG 30 2004

AMENDMENT TRANSMITTAL LETTER

Docket No.
59992(45107)Application No.
10/675,244Filing Date
September 29, 2003Examiner
H. NguyenArt Unit
2816

Applicant(s): C. Müller et al.

Invention: DRIVER CIRCUIT

TO THE COMMISSIONER FOR PATENTS

Transmitted herewith is an amendment in the above-identified application.

The fee has been calculated and is transmitted as shown below.

CLAIMS AS AMENDED					
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate	
Total Claims	- 20 =			x	
Independent Claims	- 3 =			x	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					
Other fee (please specify):					
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:					0.00

 Large Entity Small Entity No additional fee is required for this amendment. Please charge Deposit Account No. _____ in the amount of \$ _____.
A duplicate copy of this sheet is enclosed. A check in the amount of \$ _____ to cover the filing fee is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge and credit Deposit Account No. 04-1105
as described below. A duplicate copy of this sheet is enclosed.00000000041105 10675244
 Credit any overpayment.86.00 Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.*Christine C. O'Day*

Dated: August 30, 2004

Christine C. O'Day
Attorney Reg. No.: 38,256EDWARDS & ANGELL, LLP
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I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EV437821186US, in an envelope addressed to: MS Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Dated: August 30, 2004

Signature: *Christine C. O'Day*

(Christine C. O'Day)

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10/675244

CLAIMS AS FILED - PART I

(Column 1) (Column 2)

TOTAL CLAIMS	13	
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	18 minus 20= *	
INDEPENDENT CLAIMS	1 minus 3 = *	
MULTIPLE DEPENDENT CLAIM PRESENT		<input checked="" type="checkbox"/>

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

(Column 1) (Column 2) (Column 3)

AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	
	Total	*	Minus	** 20	=
Independent	*	4	Minus	*** 3	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM		<input type="checkbox"/>			

SMALL ENTITY
TYPE OR OTHER THAN
SMALL ENTITY

RATE	FEES	RATE	FEES
BASIC FEE	385.00	OR BASIC FEE	770.00
X\$ 9=		OR X\$18=	
X43=		OR X86=	
+145=		OR +290=	290
TOTAL		OR TOTAL	1060

OTHER THAN
SMALL ENTITY OR SMALL ENTITY

RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
X\$ 9=		OR X\$18=	
X43=		OR X86=	
+145=		OR +290=	
TOTAL ADDIT. FEE		OR TOTAL ADDIT. FEE	

(Column 1) (Column 2) (Column 3)

AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	*	Minus	**
Independent	*	Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM		<input type="checkbox"/>		

RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
X\$ 9=		OR X\$18=	
X43=		OR X86=	
+145=		OR +290=	
TOTAL ADDIT. FEE		OR TOTAL ADDIT. FEE	

(Column 1) (Column 2) (Column 3)

AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	*	Minus	**
Independent	*	Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM		<input type="checkbox"/>		

RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
X\$ 9=		OR X\$18=	
X43=		OR X86=	
+145=		OR +290=	
TOTAL ADDIT. FEE		OR TOTAL ADDIT. FEE	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.